

<i>SERFF Tracking Number:</i>	<i>SFMA-125819536</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Fire and Casualty Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>FR-24170</i>		
<i>TOI:</i>	<i>03.0 Personal Farmowners</i>	<i>Sub-TOI:</i>	<i>03.0000 Personal Farmowners</i>
<i>Product Name:</i>	<i>FR-24170</i>		
<i>Project Name/Number:</i>	<i>FR-24170/FR-24170</i>		

Filing at a Glance

Company: State Farm Fire and Casualty Company

Product Name: FR-24170

SERFF Tr Num: SFMA-125819536 State: Arkansas

TOI: 03.0 Personal Farmowners

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 03.0000 Personal Farmowners

Co Tr Num: FR-24170

State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Becky Harrington, Betty Montesi

Authors: Richard Haberer, Ethel Gordon

Disposition Date: 09/17/2008

Date Submitted: 09/17/2008

Disposition Status: Approved

Effective Date Requested (New): 01/15/2009

Effective Date (New): 01/15/2009

Effective Date Requested (Renewal): 03/15/2009

Effective Date (Renewal): 03/15/2009

State Filing Description:

General Information

Project Name: FR-24170

Status of Filing in Domicile: Authorized

Project Number: FR-24170

Domicile Status Comments: N/A

Reference Organization: N/A

Reference Number: N/A

Reference Title: N/A

Advisory Org. Circular: N/A

Filing Status Changed: 09/17/2008

State Status Changed: 09/17/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

We respectfully request your approval of FE-8733 Policy Endorsement. This endorsement will be mandatory and is a coverage enhancement. There will not be a corresponding rate filing.

FE-8733 Policy Endorsement expands coverage in two ways:

SERFF Tracking Number: SFMA-125819536 State: Arkansas
Filing Company: State Farm Fire and Casualty Company State Tracking Number: EFT \$50
Company Tracking Number: FR-24170
TOI: 03.0 Personal Farmowners Sub-TOI: 03.0000 Personal Farmowners
Product Name: FR-24170
Project Name/Number: FR-24170/FR-24170

1. Under ADDITIONAL COVERAGES – COVERAGES D, E, F the limitation for farm machinery, equipment and tools off premises is increased from 100 miles to 200 miles of the insured location.

2. Under SECTION I – LOSSES NOT INSURED – COVERAGES D, E, F paragraph 2.c.(1) of the water damage exclusion, which excludes flood, surface water, waves, etc., does not apply to the accidental drowning of livestock.

FE-8733 will be attached to the following new and renewal policy forms: FP-8105 Farm/Ranch Policy and FP-8102 Farm/Ranch Policy – Property/Liability Form.

BY SUBMITTING THIS FILING I CERTIFY THAT THE ATTACHED FILING HAS BEEN COMPLETED IN ACCORDANCE WITH UTAH ADMINISTRATIVE RULE R590-225 AND IS IN COMPLIANCE WITH APPLICABLE UTAH LAWS AND RULES.

Sincerely,

Thomas Monson, CPCU
Forms Director & Assistant Secretary-Treasurer
(309) 766-2270
tom.monson.apky@statefarm.com

Bob VandeBerg, CPCU
Forms Manager
(309) 766-1222
bob.vandenberg.a9dl@statefarm.com

Company and Contact

Filing Contact Information

Bob Vandeberg, bob.vandenberg.a9dl@statefarm.com
One State Farm Plaza (309) 766-1222 [Phone]
Bloomington, IL 61710 (309) 766-0225[FAX]

Filing Company Information

<i>SERFF Tracking Number:</i>	<i>SFMA-125819536</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Fire and Casualty Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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<i>TOI:</i>	<i>03.0 Personal Farmowners</i>	<i>Sub-TOI:</i>	<i>03.0000 Personal Farmowners</i>
<i>Product Name:</i>	<i>FR-24170</i>		
<i>Project Name/Number:</i>	<i>FR-24170/FR-24170</i>		

State Farm Fire and Casualty Company	CoCode: 25143	State of Domicile: Illinois
1 State Farm Plaza	Group Code: 176	Company Type:
Bloomington, IL 61710	Group Name:	State ID Number:
(309) 735-0649 ext. [Phone]	FEIN Number: 37-0533080	

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<i>Company Tracking Number:</i>	<i>FR-24170</i>		
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<i>Product Name:</i>	<i>FR-24170</i>		
<i>Project Name/Number:</i>	<i>FR-24170/FR-24170</i>		

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	Yes
Fee Explanation:	\$50 per filing x 1 filing = \$50.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Fire and Casualty Company	\$50.00	09/17/2008	22554254

<i>SERFF Tracking Number:</i>	<i>SFMA-125819536</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>FR-24170</i>		
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<i>Product Name:</i>	<i>FR-24170</i>		
<i>Project Name/Number:</i>	<i>FR-24170/FR-24170</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Becky Harrington	09/17/2008	09/17/2008

<i>SERFF Tracking Number:</i>	<i>SFMA-125819536</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>FR-24170</i>		
<i>Project Name/Number:</i>	<i>FR-24170/FR-24170</i>		

Disposition

Disposition Date: 09/17/2008

Effective Date (New): 01/15/2009

Effective Date (Renewal): 03/15/2009

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	SFMA-125819536	State:	Arkansas
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Company Tracking Number:	FR-24170		
TOI:	03.0 Personal Farmowners	Sub-TOI:	03.0000 Personal Farmowners
Product Name:	FR-24170		
Project Name/Number:	FR-24170/FR-24170		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	Policy Endorsement	Approved	Yes

SERFF Tracking Number:	SFMA-125819536	State:	Arkansas
Filing Company:	State Farm Fire and Casualty Company	State Tracking Number:	EFT \$50
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Product Name:	FR-24170		
Project Name/Number:	FR-24170/FR-24170		

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Policy Endorsement	FE-8733		Endorsement/New/Amendment/Conditions		51.00	FE-8733.pdf 8733 sbs.pdf

POLICY ENDORSEMENT

ADDITIONAL COVERAGES - COVERAGES D, E, F

Item 11.a. under **Property Off Premises** is replaced by the following:

- a. within 200 miles of the **insured location**:

farm machinery, equipment and tools. This 200 mile limitation does not apply to farm machinery or equipment that is being repaired or serviced;

SECTION I - LOSSES NOT INSURED - COVERAGES D, E, F

Under item 2.c. **Water Damage**, paragraph (1) is replaced by the following:

- (1) flood, surface water, waves, tidal water, tsunamis, seiche, overflow of a body of water, or spray from any of these, all whether driven by wind or not. This exclusion does not apply to item 2.o. under **SECTION I - LOSSES INSURED - COVERAGES D, E, F**.

CURRENT POLICY LANGUAGE FP-8105, FP-8102, FP-8122, FP-8145	PROPOSED ENDORSEMENT FE-8733	COMMENTS
<p>ADDITIONAL COVERAGES - COVERAGES D, E, F</p> <p>a. within <u>100</u> miles of the insured location: farm machinery, equipment and tools. This <u>100</u> mile limitation does not apply to farm machinery or equipment that is being repaired or serviced;</p> <p>SECTION I - LOSSES NOT INSURED - COVERAGES D, E, F</p> <p>c. Water Damage, meaning:</p> <p>(1) flood, surface water, waves, tidal water, tsunami, seiche, overflow of a body of water, or spray from any of these, all whether driven by wind or not;</p>	<p>POLICY ENDORSEMENT</p> <p>ADDITIONAL COVERAGES – COVERAGES D, E, F</p> <p>Item 11.a. under Property Off Premises is replaced by the following:</p> <p>a. within <u>200</u> miles of the insured location: farm machinery, equipment and tools. This <u>200</u> mile limitation does not apply to farm machinery or equipment that is being repaired or serviced;</p> <p>SECTION I – LOSSES NOT INSURED – COVERAGES D, E, F</p> <p>Under item 2.c. Water Damage, paragraph (1) is replaced by the following:</p> <p>(1) flood, surface water, waves, tidal water, tsunami, seiche, overflow of a body of water, or spray from any of these, all whether driven by wind or not. <u>This exclusion does not apply to item 2.o. under SECTION I – LOSSES INSURED – COVERAGES D, E, F.</u></p>	<p>Mileage limitation expanded to 200 miles.</p> <p>Flood exclusion does not apply to the drowning of livestock.</p>

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Project Name/Number:	FR-24170/FR-24170		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	09/17/2008
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Comments:

Attachment:

AR 24170 PC TD-1 - P-C Transmittal Document.pdf

Property & Casualty Transmittal Document

Arkansas

**1. Reserved for Insurance
Dept. Use Only****2. Insurance Department Use only**

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a. Date the filing is received:

b. Analyst:

c. Disposition:

d. Date of disposition of the filing:

e. Effective date of filing:

New Business

Renewal Business

f. State Filing #:

g. SERFF Filing #:

h. Subject Codes


3. Group Name	Group NAIC #
State Farm Insurance Companies	0176

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
State Farm Fire and Casualty Company	Illinois	25143	37-0533080	

5. Company Tracking Number	FR-24170
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Bob VandeBerg State Farm Fire and Casualty Company One State Farm Plaza, D-4 Bloomington, IL 61710	Forms Manager	(309) 766-1222	(309) 766-0225	bob.vandenberg.a9dl@statefarm.com
	Tom Monson State Farm Fire and Casualty Company One State Farm Plaza, D-4 Bloomington, IL 61710	Forms Director	(309) 766-2270	(309) 766-0225	tom.monson.apky@statefarm.com

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Thomas W. Monson

Filing information (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	03.0
10.	Sub-Type of Insurance (Sub-TOI)	03.0000
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	N/A
12.	Company Program Title (Marketing title)	Farm/Ranch Program
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description) -
14.	Effective Date(s) Requested	January 15, 2009 for new business and March 15, 2009 for renewals.
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	n/a
17.	Reference Organization # & Title	n/a
18.	Company's Date of Filing	September 17, 2008
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	FR-24170
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
Check #: Submitted via EFT Amount: \$50.00	
Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.	

***Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)